	PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number			
• ^	Effective October 1, 2001 / Myth Association						1199	7/	γ	
		CLAIMS AS FILED - PART I Show					1/2 (<u>/</u>	12	\propto /	
	TOTAL CLA	IMS	(Co	(Column 1) (Column 2		TYPE	ENTITY OTHE		HER THAN	
	FOR					RAT	E FEE	RAT		
	TOTAL CHARGEABLE CLAIMS		/	NUMBER FILED NUMBER EXT		BASIC	FEE 370.00	OR BASIC		
			15/2	minus 20= *)= '			
	INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PR		15	minus 3 = *		X42=				
							-00	OR X84:	=	
-	* If the difference in column 1 is less than zero, enter "0" in column 2					+140		OR +280	=	
	1/2/1/1	CLAIMS AS AMENDED - PART II					TOTAL 435 OR TOTAL			
	(Column 1) (Column 2) (Column 3)					SMALL ENTITY OR SMALL ENTITY				
•		REMAINING	G	HIGHEST NUMBER PRÉCES			ADDI-	JA SMAL	ADDI-	
	Total Independen	AMENDMEN		PREVIOUSI PAID FOR	Y FYTEA	RATE	TIONAL FEE	RATE	TIONAL	
	Independen	1/2	Minus	*20) = 0	X\$ 9=	1	R X\$18=	FEE	
	FIRST PRE		Minus Mili Tipi E c	*** 5	-	X42=			-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						410	R X84=	4	
					· .	+140= TOTAL	0.			
-	(Column 1) (Column 2) (Column 3)					ADDIT. FEE	ADDIT. FEE OR ADDIT. FEE			
		CLAIMS REMAINING		HIGHEST NUMBER		1	ADDI-	/		
ENDMENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL	RATE	ADDI- TIONAL	
		*	Minus	**	=	X\$ 9=	FEE		FEE	
AM	Independent	*	Minus	***	=	ļ	OF	X\$18=		
		MINTON OF W	ULTIPLE DE	PENDENT CLAII	И		OR	X84=		
						+140=	OR	+280=		
		(Column 1)		**		TOTAL ADDIT. FEE	OR	TOTAL ADDIT. FEE		
ပ		CLAIMS REMAINING		(Column 2) HIGHEST	(Column 3)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT		AFTER AMENDMENT		NUMBER PREVIOUSLY	PRESENT EXTRA		ADDI- TIONAL		ADDI-	
NDN	Total	*	Minus	PAID FOR	 		FEE	RATE	TIONAL FÉE	
WE	Independent	*	Minus	***	=	X\$ 9≈	OR	X\$18=		
	FIRST PRESE	VTATION OF MU	LTIPLE DEP	ENDENT CLAIM		X42=	OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 100. **TOTAL										
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE ADDIT. FEE OR ADDIT. FEE I OR ADDIT. FEE										
of the state of th										